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**FACSIMILE TRANSMITTAL SHEET**

**Deliver to:** Examiner Russell L. Guill, Art Unit 2123  
**Firm Name:** U.S. Patent & Trademark Office  
**Fax Number:** 571-273-8300  
**From:** Joni D. Stutman-Horn **Operator:** Anne Collette  
**Date:** December 13, 2005  
**App. No.:** 10/025,217  
**No. of pages:** 11 (including cover sheet)  
**Client/Matter:** 42P12564 **Docket Date:** 12/13/2005 **Atty:** JDS

Dear Examiner:

Please find the following document(s) attached:

- 1) Transmittal Form (1 page)
- 2) Fee Transmittal – original & copy (2 pages)
- 3) Response to Office Action (7 pages)

Thank you.

<b>CERTIFICATE OF TRANSMISSION</b>	
I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.	
By: <u>Anne Collette</u> Anne Collette	Date: <u>December 13, 2005</u>

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PTO/SB/21 (09-04)

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TRANSMITTAL  
FORM

(To be used for all correspondence after initial filing)

Total Number of Pages In This Submission  
(not including this page)

Application Number	10/025,217
Filing Date	December 18, 2001
First Named Inventor	Igor Lickumovich
Art Unit	2123
Examiner Name	Russell L. Guill
Total Number of Pages In This Submission (not including this page)	9
Attorney Docket Number	42P12564

## ENCLOSURES (Check all that apply)

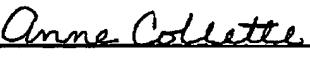
<input checked="" type="checkbox"/> Fee Transmittal Form (2 copies)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Blakely, Sokoloff, Taylor & Zafman LLP		
Signature			
Printed name	Michael J. Mallie		
Date	December 13, 2005	Reg. No.	36,591

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Anne Collette	Date	December 13, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL  
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 450.00)**Complete If Known**

Application Number	10/025,217
Filing Date	December 18, 2001
First Named Inventor	Igor Liokumovich
Examiner Name	Russell L. Guill
Art Unit	2123
Attorney Docket No.	42P12564

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify):  
 Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

**2. EXCESS CLAIM FEES**Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity

Fee (\$) Fee (\$)

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

Total ClaimsExtra ClaimsFee (\$)Fee Paid (\$)Multiple Dependent ClaimsFee (\$)Fee Paid (\$)

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20

Indep. ClaimsExtra ClaimsFee (\$)Fee Paid (\$)

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x		=

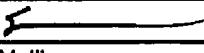
**4. OTHER FEE(S)**

1) Extension for response within second month (Fee Code 1252)

Fees Paid (\$)

450.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 36,591	Telephone 408-420-8300
Name (Print/Type)	Michael J. Mallie		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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10/025,217  
Attorney Docket No.: 42P12564

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: )  
Liokumovich, et al. )  
Examiner: Russell L. Guill )  
Application No.: 10/025,217 )  
Docket No.: 42P12564 )  
Art Unit: 2123 )  
Filed: Dec. 18, 2001 )  
VIA FAX: (571) 273-8300 )  
For: A PC PLATFORM SIMULATION )  
SYSTEM EMPLOYING EFFICIENT )  
MEMORY ACCESS SIMULATION IN A )  
DIRECT EXECUTION ENVIRONMENT )

**AMENDMENT AND RESPONSE AND**  
**PETITION FOR A TWO MONTH EXTENSION**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In accordance with 37 C.F.R. § 1.136(a), Applicant for the above-identified application respectfully petitions the Commissioner for a two (2) month extension of time, extending the period for response to Dec. 13, 2005, from the Office Action dated July 13, 2005. Please charge the petition filing fee of \$450.00 to Deposit Account No. 02-2666.

If it should be determined that a longer extension of time is required to prevent this application from being abandoned, please charge any additional fees to Deposit Account No. 02-2666. A copy of the Fee Transmittal is enclosed for deposit account charging purposes.

In response to the Office Action mailed on Jul, 13, 2005, please reconsider the pending claims based on the following amendment.

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